

Bureau of Prisons
Health Services
Dental Routine Care
Comp/Periodic Exam

Inmate Name: GARCIA, WALTER
Date of Birth: 01/19/1950
Encounter Date: 07/11/2018 12:22

Sex: M Race: WHITE
Provider: Lopez, Gilbert DMD/Chief

Reg #: 65584-054
Facility: LOR
Unit: N04

Reviewed Health Status: Yes

ASSESSMENTS:

Health Problems Newly Identified During This Encounter:

Health Problem

Allergies: Denied

Occlusion: Class III

Oral Hygiene: Fair

CPITN: 1 | x | x
 x | 1 | x

Hard and soft tissue examination performed and documented: Yes

Head & Neck/Soft Tissue within normal limits? Yes

Comments:

* Decayed 0 Missing 22 Filled 12

Additional Findings:

Comments:

Pain Assessment

COMPLAINT 1 Provider: Lopez, Gilbert DMD/Chief Dental

Pain Complaint: No Pain Reported

Oral Area: General Oral

Description

Pain Location:

Pain Scale: 0

Pain Qualities:

History of Trauma:

Onset:

Duration:

Exacerbating Factors:

Relieving Factors:

Comments:

Additional Findings and Procedures

PROCEDURE:

Dental Procedures

Ex. D